

2008 Kansas City Networking Small Business Breakfast Meeting

MED Week Kick Off

Registration Form

October 7, 2008

**Please complete this registration form and
fax to 816-823-1167 before noon on Friday, October 3.**

Location: The Arrowhead Club, One Arrowhead Drive, Kansas City, MO 64129

Time: 7:30 a.m.

Cost: \$16.00 per person, if registered **before noon** on Friday, October 3.

\$18.00 **after noon** on Friday, October 3 and for walk-ins

(Cash payable at the door, Check payable at the door or mail by September 26, MasterCard or Visa accepted with this pre registration only)

Name: _____
Last First

(Please print clearly or type your name as it will appear on your name tag)

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Special Needs: _____

Additional Attendees: _____

() I understand that there is a charge per registered attendee. Please indicate payment method below.

Methods of Payment:

() Cash (please bring to event)

() Check (please bring to event or mail with this form to: Federal Executive Board, 1500 E. Bannister Rd, Rm 1176, Kansas City, MO. 64131, payable to Federal Executive Board) (all returned checks will be subject to a \$25 service fee to be paid by money order or cashier check.)

() MasterCard

() Visa

Card # _____

Expiration date: _____

Signature: _____

Phone number of credit card holder: _____

Checks and Credit Cards are payable to The Federal Executive Board. \$.25 charge for Credit cards (Payment is non-refundable and cancellations cannot be accepted. Substitutes will be allowed.)

Questions: Please call us at 816-926-7203

All payments will be processed through the Federal Executive Board